



ROOM USE GUIDELINES

The Pajaro Valley Community Health Trust is pleased to offer the Kathleen A. King Community Room for use by nonprofits free of charge* and to for-profit organizations at a minimal flat rate fee*. To ensure a pleasing experience for all, please thoroughly review this document.

Available equipment:

70 chairs	Rolling screens to divide room
Four 6' round tables (seat 24)	Podium
15 rectangular tables (seat 45)	2 Piece wooden stage
Rolling carts to store/move tables & chairs	

Renter is subject to damage and or cleaning fees based on repair/cleaning costs incurred by the Health Trust following Renter occupancy. In addition to the aforementioned fees, Renter is subject to a \$75 fee for failure to adhere to the following guidelines:

Renter Guidelines:

1. Although, use of the room is available at no cost, Renter must provide valid Credit Card Number prior to event for security deposit. **Application will not be processed until this information has been provided.**
2. Renter must provide proof of liability insurance with Pajaro Valley Community Health Trust, CHS and Watsonville Community Hospital Corporation as additional insured (\$1 million limit).
3. Occupancy of Community Room will be limited to **100** people.
4. Renter must use the appropriate entrance to the Community Room and provide their own signage/ directions to minimize interruption of business at the Diabetes Health Center. **Interruption of business at the Diabetes Health Center constitutes failure to adhere to the agreed upon Guidelines and is subject to a \$75 fee.**
5. **Renter questions or concerns upon arrival can be immediately addressed during business hours by calling 831-761-5639 or walking into the Pajaro Valley Community Health Trust main door.**
 - a. For room use outside of regular business hours: Renter must use phone located in the Lobby to Dial "0" to request access before/after business hours. The operator will contact security to unlock the door to the Community Room.
6. Renter is responsible for cleaning tables used when food is provided/ disposing of all trash off-site. You must bring your own cleaning supplies, if needed.



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7. Renter is responsible for restoring the Community Room to its original configuration, storing tables and chairs behind the rolling screens.
8. **To avoid floor damage and disruption of business to adjacent offices, no furniture may be dragged across the floor.**
9. **Renters are responsible of providing all of their own supplies**, including but not limited to: pens, paper, tape, extension cords, audio-visual equipment and any related technical support. Items made available to the Renter by the Health Trust are listed above (See 'Available Equipment'). **Requests for use of Health Trust supplies outside of the aforementioned 'Available Equipment' constitute failure to adhere to the agreed upon Guidelines and will be subject to a \$75 fee.**
10. Cancellations must be made 24 hours prior to reservation, by email to Margie Casillas at mcasillas@pvhealthtrust.org or by phone 831-761-5639.
11. Smoking is not permitted in or around the building at any time.
12. Do not use tape or screws or drive nails into any doors, walls or woodwork.
Activities must be conducive to an office environment. (See **Addendum A** for specific information.)

Additional Information:

- Reservations may be made up to 3 months in advance.
- Please bring an appropriate number of people to set up to avoid fees that may be incurred for damage or interruption of business (See Guideline 7).
- Parking is free and available on both sides of the building, including handicapped parking.
- Restrooms are located on the main level to the left and right of the conference room doors.
- Temperature control is set and cannot be changed.
- Wi-Fi is available for use: Network: **PVCHT_Guest** Password: **GrapeFruit_85**

* Use of the room will be made available to 501 (c)3 nonprofit organizations at no charge for up to 6 times per year; use beyond 6 times per year may be subject to additional fees. Renter use of the Community Room does not imply the Pajaro Valley Community Health Trust's endorsement or approval of the Renter's activities or actions. The Pajaro Valley Community Health Trust reserves the right to deny access to the room upon the recommendation of the Chief Executive Officer.

* Use of the Community Room will be made available to for-profit organizations a rate of \$250.00 per usage; this fee is a flat rate and subject to change. Renter use of the Community Room does not imply the Pajaro Valley Community Health Trust's endorsement or approval of the Renter's activities or actions. The Pajaro Valley Community Health Trust reserves the right to deny access to the room upon the recommendation of the Chief Executive Officer.



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APPLICATION

Renter Organization: _____

Contact Name: _____

Address: _____

Contact Phone Number: _____ FAX Number: _____

E-Mail Address: _____

Nonprofit ID Number: _____

Brief Description of Agency/Renter: _____

Purpose of Meeting: _____

Date/s Requested: _____ Time: From _____ To _____

Number of Attendees: _____

Credit Card #: _____ Exp. Date: _____ Security Code: _____

Name on Card: _____

Liability Policy #: _____ Proof of Insurance Attached: Yes No

I have fully read, understand and hereby agree upon all terms and conditions as stated in the **Guidelines for use of the Kathleen A. King Community Room**. I certify that all information given in this application is accurate and true.

Printed Name of Applicant

Signature of Applicant

Date



KATHLEEN A. KING COMMUNITY ROOM USE GUIDELINES & APPLICATION

RELEASE

In consideration for the use of the Pajaro Valley Community Health Trust, Kathleen A. King Community Room located at 85 Nielson Street, Watsonville, CA, the undersigned, on behalf of itself and on behalf of each of their respective heirs, executors, guests, administrators, trustors, trustees, beneficiaries, predecessors, successors, assigns, partners, partnerships, parent, subsidiary, affiliated and related entities, officers, directors, principals, agents, employees, servants, representatives and all persons, firms, associations and/or corporations connected with them, including without limitation, their insurers, sureties and attorneys **hereby release and forever discharge** the Pajaro Valley Community Health Trust, Quorum Health, Watsonville Community Hospital Corporation and their respective heirs, executors, administrators, trustors, trustees, beneficiaries, predecessors, successors, assigns, partners, partnerships, parent, subsidiary, affiliated and related entities, officers, directors, principals, agents, employees, servants, representatives, and all persons, firms, associations and/or corporations connected with them, including without limitation, their insurers, surety and attorneys, **of and from** any and all claims, demands, causes of actions, obligations, injuries, damages, losses, costs, attorneys' fees and expenses of every kind and nature whatsoever, known or unknown, fixed or contingent, by reason of any manner, cause or thing arising out of or connected with the use of the Pajaro Valley Community Health Trust premises located at 85 Nielson Street, Watsonville, California.

Dated: _____

Signature of Organization and/or authorized representative

Print Name of Organization

For PVCHT use only:

Approved by: _____